PTO/SB/21 (02-04)
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## **TRANSMITTAL FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/695,419-Conf. #4483
Filing Date	October 27, 2003
First Named Inventor	LinLin Chen
Art Unit	2818
Examiner Name	P. T. Dang
Attorney Docket Number	291958171US4

E	NCLOSURES (Check all that app	oly)				
X Fee Transmittal Form	Drawing(s)	After Allowance communication to Technology Center (TC)				
x Fee Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences				
X Amendment/Reply	Petition	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)				
After Final	Petition to Convert to a Provisional Application	Proprietary Information				
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter				
X Extension of Time Request	Terminal Disclaimer	X Other Enclosure(s) (please Identify below): Return Postcard				
Express Abandonment Request	Request for Refund					
X Information Disclosure Statement	CD, Number of CD(s)	·				
Certified Copy of Priority Document(s)						
Response to Missing Parts/ Incomplete Application	Remarks					
Response to Missing Parts						
l under 37 CFR 1.52 or 1.53						
SIGNAT	URE OF APPLICANT, ATTORNEY, OF	RAGENT				
Firm PERKINS COIE LLI Paul T. Parker - 38,						
Signature Pan Pan	Paul Parker					
Date 6/24/20	504					

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JUN 2 4 7004 Edder the Paperwork Reduction Act of 1995, no persons are requ	U.S. Patent and Trade	PTO/SB/17 (10-03) proved for use through 7/31/2006. OMB 0651-0032 mark Office; U.S. DEPARTMENT OF COMMERCE ation unless it displays a valid OMB control number.
S CEE TO A NOMITTAL	Co	mplete if Known
FEE TRANSMITTAL	<ul> <li>Application Number</li> </ul>	10/695,419-Conf. #4483
for FY 2004	Filing Date	October 27, 2003
	First Named Inventor	LinLin Chen
Effective 10/01/2003. Patent fees are subject to annual revision.	Examiner Name	P. T. Dang
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2818
TOTAL AMOUNT OF PAYMENT (\$) 600.00	Attorney Docket No.	291958171US4

TOTAL AMOUNT OF PAYMENT (\$) 600.00				Attorney Docket No.			cket No	).	291958171US4			
METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)							
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Charg	e fee(s) inc	licated t	pelow [	X Credit any	overpayments	1053	130	1053	130	Non-Engl	ish specification	
Charg	e any addii	tional fe	e(s) or any u	inderpayment o	f fee(s)	1812	2,520	1812	2,520	For filing a	request for ex parte reexamination	
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to the abov	e-identifie	d depo	sit account.			1805	1,840*	1805	1,840*	Requestir	ng publication of SIR after	
		FEE (	CALCULA	ATION		1251	110	2251	55	Extension	for reply within first month	
1. BASIC	FILING	FEE				1252	420	2252	210	Extension	for reply within second month	420.00
Large Entit	y Small	Entity				1253	950	2253	475	Extension	for reply within third month	
Fee Fee Code (\$)	Fee Code	Fee (\$)	Fee D	Description	Fee Paid	1254	1,480	2254	740	Extension	for reply within fourth month	
1001 770	2001	385	Utility	filing fee		1255	2,010	2255	1,005	Extension	for reply within fifth month	
1002 340	2002	170	Desig	n filing fee		1401	330	2401	165	Notice of	Appeal	
1003 530	2003	2003 265 Plant filing fee		1402	330	2402	165	Filing a b	rief in support of an appeal			
1004 770	2004	2004 385 Reissue filing fee		1403	290	2403	145	Request 1	for oral hearing			
1005 160	160 2005 80 Provisional filing fee			1451	1,510	1451	1,510	Petition to	institute a public use proceeding			
		SUBT	TOTAL (1	(\$)	0.00	1452	110	2452	55	Petition to	revive – unavoidable	
				(4)		1453	1,330	2453	665	Petition to	revive - unintentional	
2. EXTRA	CLAIN	1 FEE		TILITY AND	REISSUE	1501	1,330	2501	665	Utility issu	ue fee (or reissue)	
			Extra Claims	Fee from below	Fee Paid	1502	480	2502	240	Design is	sue fee	
Total Claims		-** =	,	( :	=	1503	640	2503	320	Plant issu	e fee	
Independent Claims		- <b>**</b> =	,	,	=	1460	130	1460	130	Petitions	to the Commissioner	
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1202 18	2202			xcess of 20		1809	770	2809	385	Filing a si (37 CFR	ubmission after final rejection	
1201 86	2201		•	t claims in excess of 3		1810	770	2810	385	For each	additional invention to be	
1203 290		2203 145 Multiple dependent claim, if not paid 2204 43 ** Reissue independent claims								I (37CFR 1.129(b))		
1204 86	2204		over orig	inal patent		1801	770 900	2801 1802	385 900	Request t	for Continued Examination (RCE) for expedited examination	
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SUBMITTED BY	į.			(Complete	(if applicable))
Name (Print/Type)	Paul T. Parker	Registration No. (Attorney/Agent)	38,264	Telephone	(206) 359-8000
Signature	Panl	Parlon		Date	6/24/04

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6/24/03	Melos of Dimension Almbora
Dated: 6/04/04 Signature:	(Melody Almberg)